

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

BADLANDS PAC

ADDRESS (number and street)

PO Box 26141

Check if different
than previously
reported. (ACC)

Alexandria

VA

22313

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00543207

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☒ April 15
Quarterly Report (Q1)
- ☐ July 15
Quarterly Report (Q2)
- ☐ October 15
Quarterly Report (Q3)
- ☐ January 31
Year-End Report (YE)
- ☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)
- ☐ Termination Report
(TER)

(b) Monthly
Report
Due On:

- ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11)
(Non-Election
Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☐ Sep 20 (M9) ☐ Dec 20 (M12)
(Non-Election
Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:

- ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of(d) 30-Day
POST-Election
Report for the:

- ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y
01 01 2018

through

M M M / D D D / Y Y Y Y Y Y
03 31 2018

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Marston, Christopher, M, ,

Type or Print Name of Treasurer

Signature of Treasurer

Marston, Christopher, M, ,

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 09 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office
Use
Only**FEC FORM 3X**
Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

BADLANDS PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2018 To: M M / D D / Y Y Y Y Y Y
03 / 31 / 2018

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2018		15014.92
(b) Cash on Hand at Beginning of Reporting Period.....	15014.92	
(c) Total Receipts (from Line 19)	104440.29	104440.29
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	119455.21	119455.21
7. Total Disbursements (from Line 31)	19750.00	19750.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	99705.21	99705.21
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

BADLANDS PAC

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
01	/	01	/	2018

To:

M M	/	D D	/	Y Y Y Y
03	/	31	/	2018

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

22000.00

22000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

22000.00

22000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

10000.00

10000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

32000.00

32000.00

12. Transfers From Affiliated/Other

Party Committees.....

72440.29

72440.29

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))

104440.29

104440.29

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

104440.29

104440.29

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1850.00	1850.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1850.00	1850.00
22. Transfers to Affiliated/Other Party Committees.....	1000.00	1000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11400.00	11400.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	2000.00	2000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	2000.00	2000.00
29. Other Disbursements (Including Non-Federal Donations).....	3500.00	3500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	19750.00	19750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19750.00	19750.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	32000.00	32000.00
34. Total Contribution Refunds (from Line 28(d))	2000.00	2000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30000.00	30000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1850.00	1850.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	1850.00	1850.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BRANDT, ACE, , ,

Mailing Address P.O. BOX 230

City
FARGO

State
ND

Zip Code
58107-0230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BRANDT HOLDINGS

Occupation (for Individual)

PRES/CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 05 / 2018

Transaction ID : SA11A.10540

Amount of Each Receipt this Period

10000.00

☐ Memo Item

CONTRIBUTION

SEE REATTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BRANDT, ACE, , ,

Mailing Address P.O. BOX 230

City
FARGO

State
ND

Zip Code
58107-0230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

BRANDT HOLDINGS

Occupation (for Individual)

PRES/CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2018

Transaction ID : SA11A.10854

Amount of Each Receipt this Period

- 5000.00

☒ Memo Item

CONTRIBUTION

REATTRIBUTION TO SPOUSE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BRANDT, BRITTANY, , ,

Mailing Address P.O. BOX 230

City
FARGO

State
ND

Zip Code
58107-0230

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

SELF EMPLOYED

Occupation (for Individual)

NONE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 15 / 2018

Transaction ID : SA11A.10853

Amount of Each Receipt this Period

5000.00

☒ Memo Item

CONTRIBUTION

REATTRIBUTION FROM SPOUSE

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCLEOD, DOUGLAS CAMERON, , ,

Mailing Address 518 17TH ST
 SUITE 1525

City
 DENVER

State
 CO

Zip Code
 80202-

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 PETROGULF CORP.

Occupation (for Individual)
 GEOLOGIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 16 / 2018

Transaction ID : SA11A.10886

Amount of Each Receipt this Period

7000.00

☐ Memo Item
 CONTRIBUTION

REFUNDED \$2,000.00 ON 03/31/2018

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SABIN, ANDREW, , ,

Mailing Address 300 PANTIGO PL STE 102

City
 EAST HAMPTON

State
 NY

Zip Code
 11937-2630

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)
 SABIN METAL

Occupation (for Individual)
 OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 19 / 2018

Transaction ID : SA11A.10989

Amount of Each Receipt this Period

5000.00

☐ Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
 federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

12000.00

22000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 22

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. NATIONAL ASSOCIATION OF CONVENIENCE STORES PAC

Mailing Address 1600 DUKE ST

City
ALEXANDRIA

State
VA

Zip Code
22314-3466

FEC ID number of contributing
federal political committee.

C C00126763

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 12 / 2018

Transaction ID : SA11C.10885

Amount of Each Receipt this Period

5000.00

☐ Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. VALERO PAC

Mailing Address PO BOX 696000

City
SAN ANTONIO

State
TX

Zip Code
78269-6000

FEC ID number of contributing
federal political committee.

C C00109546

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 09 / 2018

Transaction ID : SA11C.10630

Amount of Each Receipt this Period

5000.00

☐ Memo Item
 CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10000.00

10000.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 22

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CRAMER VICTORY FUND

Mailing Address PO BOX 26141

City

ALEXANDRIA

State

VA

Zip Code

22313-

FEC ID number of contributing
federal political committee.

C

C00662353

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

72440.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

Transaction ID : SA12.12008

Amount of Each Receipt this Period

52866.45

☐ Memo Item

TRANSFER

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ARMSTRONG, CONNIE, A., ,

Mailing Address 709 PALM BEACH ROAD

City

DICKINSON

State

ND

Zip Code

58601-7307

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONEOccupation (for Individual)
RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2018

Transaction ID : SA.11106.3.CS01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ARMSTRONG, MICHAEL, J., ,

Mailing Address P.O. BOX 1999

City

DICKINSON

State

ND

Zip Code

58602-1999

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELFOccupation (for Individual)
OIL AND GAS PRODUCTION

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		21		2018

Transaction ID : SA.11107.3.CS01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....▶

52866.45

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 22

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ARTHAUD, JAMES, R., ,

Mailing Address P.O. BOX 197

City
MEDORA

State
ND

Zip Code
58645-0197

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
MBI LEASING LLC

Occupation (for Individual)
REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2018

Transaction ID : SA.11417.3.CS01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ARTHAUD, LYNN, , ,

Mailing Address P.O. BOX 197

City
MEDORA

State
ND

Zip Code
58645-0197

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2018

Transaction ID : SA.11405.3.CS01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BURGUM, DOUG, , ,

Mailing Address P.O. BOX 1147

300 BROADWAY N #404

City
FARGO

State
ND

Zip Code
58107-1147

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STATE OF NORTH DAKOTA

Occupation (for Individual)
GOVERNOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2018

Transaction ID : SA.11587.3.CS01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

SUBTOTAL of Receipts This Page (optional).....▶

0.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 22

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EBERHART, DAN, , ,

Mailing Address 7131 E RANCHO VISTA DR.
UNIT 6001

City
SCOTTSDALE

State
AZ

Zip Code
85251-1466

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CANARY LLC

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 29 / 2018

Transaction ID : SA.11522.3.CS01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ELLINGSON, DERRIK, , ,

Mailing Address 3364 MONROE ST

City

FARGO

State

ND

Zip Code

58104-6985

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ELLINGSON COMPANIES

Occupation (for Individual)
RRV GENERAL MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : SA.11593.3.CS01

Amount of Each Receipt this Period

2700.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. EVANS, FRED, W., ,

Mailing Address 4949 TRIPLE T RD

City

STANLEY

State

ND

Zip Code

58784-9557

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
RANCH/OIL

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2018

Transaction ID : SA.11216.3.CS01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 22

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EVANS, JOYCE, , ,

Mailing Address 4949 TRIPLE T RD

City
STANLEY

State
ND

Zip Code
58784-9557

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF EMPLOYED

Occupation (for Individual)
RANCH/OIL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2018

Transaction ID : SA.11214.3.CS01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAMM, HAROLD, G., ,

Mailing Address PO BOX 1295

City
OKLAHOMA CITY

State
OK

Zip Code
73101-1295

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
CONTINENTAL RESOURCES

Occupation (for Individual)
CHAIRMAN/CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 31 / 2018

Transaction ID : SA.11882.3.CS01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HELGAAS, KATHRYN, J., ,

Mailing Address 10 TALLGRASS TRAIL

City
HORACE

State
ND

Zip Code
58047-9548

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
STATE OF NORTH DAKOTA

Occupation (for Individual)
FIRST LADY

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 27 / 2018

Transaction ID : SA.11586.3.CS01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 22

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PAHLKE, DALE, , ,

Mailing Address 1727 STATE STREET

City
BISMARCK

State
ND

Zip Code
58501-1999

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DAKOTA COMMUNITY BANK

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2018

Transaction ID : SA.11563.3.CS01

Amount of Each Receipt this Period

2000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. THARALDSON, CONNIE, , ,

Mailing Address 1201 PAGE DRIVE, SUITE 200

City
FARGO

State
ND

Zip Code
58103-2355

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
NONE

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2018

Transaction ID : SA.11103.3.CS01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. THARALDSON, GARY, , ,

Mailing Address 2809 30TH AVE S

City
FARGO

State
ND

Zip Code
58103-6151

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
THARALDSON HOSPITALITY MANAGEMENT CO

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 21 / 2018

Transaction ID : SA.11104.3.CS01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 22

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CRAMER VICTORY FUND

Mailing Address PO BOX 26141

City
ALEXANDRIA

State
VA

Zip Code
22313-

FEC ID number of contributing
federal political committee.

C C00662353

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

72440.29

Date of Receipt

01 / **28** / **2018**

Transaction ID : SA12.12011

Amount of Each Receipt this Period

19573.84

☐ Memo Item

TRANSFER

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LONG, TOM, , ,

Mailing Address 7155 W CIRCLE DR.

City
DALLAS

State
TX

Zip Code
75214-1942

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
ENERGY TRANSFER

Occupation (for Individual)
CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

12 / **15** / **2017**

Transaction ID : SA.10567.3.CC01

Amount of Each Receipt this Period

700.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ORTOWSKI, CODY, , ,

Mailing Address 115 N RIVERCREST DR.

City
FORT WORTH

State
TX

Zip Code
76107-1150

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELECT ENERGY SERVICES

Occupation (for Individual)
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

12 / **14** / **2017**

Transaction ID : SA.12003.3.CC01

Amount of Each Receipt this Period

2700.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

19573.84

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 22
(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PAHLKE, DALE, , ,

Mailing Address 1727 STATE STREET

City
BISMARCK

State
ND

Zip Code
58501-1999

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
DAKOTA COMMUNITY BANK

Occupation (for Individual)
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 02 / 2018

Transaction ID : SA.10575.3.CC01

Amount of Each Receipt this Period

2300.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SCHMITZ, JOHN, , ,

Mailing Address PO BOX 819

City
GAINESVILLE

State
TX

Zip Code
76241-0819

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELECT ENERGY SERVICES

Occupation (for Individual)
CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 13 / 2017

Transaction ID : SA.10564.3.CC01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WARREN, AMY, , ,

Mailing Address 8111 WESTCHESTER DR STE 700

City
DALLAS

State
TX

Zip Code
75225-6143

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
SELF

Occupation (for Individual)
HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
12 / 14 / 2017

Transaction ID : SA.10554.3.CC01

Amount of Each Receipt this Period

5000.00

☒ Memo Item

TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 22

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

BADLANDS PAC

A. ENERGY TRANSFER EMPLOYEE MANAGEMENT COMPANY PAC

Mailing Address 400 W 15TH ST, SUITE 720

City
AUSTINState
TXZip Code
78701-1661FEC ID number of contributing
federal political committee.**C**

C00438754

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
12	/	14	/	2017

Transaction ID : SA.10553.3.CC01

Amount of Each Receipt this Period

5000.00

☒ Memo Item
 TRANSFER

TRANSFER FROM CRAMER VICTORY FUND

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

☐ Memo Item

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
	/		/	

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

0.00

TOTAL This Period (last page this line number only)..... ▶

72440.29

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 17 OF 22

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 7704 LEESBURG PIKE

City
FALLS CHURCHState
VAZip Code
22043Purpose of Disbursement
DATABASE SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		07		2018

FEC Identification Number

C**Transaction ID : SB21B.I2426**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GULA GRAHAMMailing Address 499 S CAPITOL ST SW
STE 420City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		26		2018

FEC Identification Number

C**Transaction ID : SB21B.I2383**

Amount of Each Disbursement this Period

1600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
-------	---	-------	---	-----------

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1850.00

TOTAL This Period (last page this line number only).....▶

1850.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 18 OF 22

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name (Last, First, Middle Initial)

A. CRAMER VICTORY FUND

Mailing Address PO BOX 26141

City
ALEXANDRIAState
VAZip Code
22313Purpose of Disbursement
ADVANCE FOR EXPENSES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		05		2018

FEC Identification Number

C C00662353**Transaction ID : SB22.I2417**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

1000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 19 OF 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name (Last, First, Middle Initial)

A. CRAMER FOR SENATE

Mailing Address P.O. BOX 396

City
BISMARCKState
NDZip Code
58502

Purpose of Disbursement

Candidate Name

CRAMER, KEVIN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: ND District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0				

FEC Identification Number

C C00504704**Transaction ID : SB23.I2341**

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CRAMER FOR SENATE

Mailing Address P.O. BOX 396

City
BISMARCKState
NDZip Code
58502

Purpose of Disbursement

Candidate Name

CRAMER, KEVIN, , ,

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: ND District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0				

FEC Identification Number

C C00504704**Transaction ID : SB23.I2342**

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ERIK PAULSENMailing Address P.O. BOX 44369
250 PRAIRIE CENTER DRIVECity
EDEN PRAIRState
MNZip Code
55344Purpose of Disbursement
CONTRIBUTION

Candidate Name

PAULSEN, ERIK, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			2	3			2	0				

FEC Identification Number

C C00439661**Transaction ID : SB23.I2401**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7900.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF ERIK PAULSEN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2018

Mailing Address P.O. BOX 44369

250 PRAIRIE CENTER DRIVE

City
EDEN PRAIRState
MNZip Code
55344Purpose of Disbursement
CONTRIBUTION

Candidate Name

PAULSEN, ERIK, , ,

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☒ General
☐ Other (specify) ▼

State: MN

District: 03

Category/
Type

FEC Identification Number

C C00439661**Transaction ID : SB23.I2402**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RICK FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		19		2018

Mailing Address 404 BOSTON HOLLOW RD

City
ELIZABETHState
PAZip Code
15037

Purpose of Disbursement

Candidate Name

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2018

☐ Primary ☐ General
☒ Other (specify) ▼

State: PA

District: 18

Category/
Type

FEC Identification Number

C C00658708**Transaction ID : SB23.I2385**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Category/
Type

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3500.00

TOTAL This Period (last page this line number only).....▶

11400.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name (Last, First, Middle Initial)

A. MCLOUD, DOUGLAS, , ,

Mailing Address 518 17TH ST STE 1525

City
DENVERState
COZip Code
80202Purpose of Disbursement
REFUND OF EXCESSIVE CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2018

FEC Identification Number

C**Transaction ID : SB28A.I2598**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2000.00

2000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 22

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

BADLANDS PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF HAGEDORNMailing Address 11 CIVIC CENTER PLZ
STE 007City
MANKATOState
MNZip Code
56001Purpose of Disbursement
NON-FEDERAL CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1			3	0			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I2427**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF RYAN RAUSCHER

Mailing Address P.O. BOX 1913

City
BISMARCKState
NDZip Code
58502Purpose of Disbursement
NON-FEDERAL POLITICAL CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	0			2	0	1	8		

FEC Identification Number

C**Transaction ID : SB29.I2305**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3500.00

3500.00